



## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: MailMail Stop ISSUE FEE  
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22203 7590 01/05/2005

KUSNER & JAFFE  
HIGHLAND PLACE SUITE 310  
6151 WILSON MILLS ROAD  
HIGHLAND HEIGHTS, OH 44143

04/08/2005 DENMANU2 00000024 10815315

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

Laura K. Cahill

(Depositor's name)

(Signature)

April 4, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/815,315	04/01/2004	Michael A. Centanni	ST8803US.CIP	7251

TITLE OF INVENTION: HEATING APPARATUS FOR VAPORIZER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/05/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
LEUNG, PHILIP H	3742	219-628000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kusner &amp; Jaffe

2 Michael A. Centanni

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## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

STERIS Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Temecula, California

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 4

4b. Payment of Fee(s):

☐ A check in the amount of the fee(s) is enclosed.☒ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge additional fees to charge additional fees to Deposit Account Number 50-0537 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date

April 4, 2005

Typed or printed name

Mark Kusner

Registration No.

31,115

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Practitioner's Docket No. ST8803.1US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Michael A. Centanni et al.

Confirmation No. 7251

Application No.: 10/815,315

Group No.: 3742

Filed: April 1, 2004

Examiner: Philip H. Leung

For: ELECTROMAGNETICALLY RESPONSIVE HEATING APPARATUS FOR VAPORIZER

Mail Stop Issue Fee

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

TRANSMITTAL OF PAYMENT OF ISSUE FEE (37 C.F.R. § 1.311)

1. Applicant hereby pays the issue fee for the attached Issue Fee Transmittal PTOL-85.
2. Fee (37 C.F.R. § 1.18 (a)):

Application status is other than a small entity.

Issue Fee:	\$1,400.00
Publication Fee:	\$300.00
Soft Copies	\$12.00

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10\*

(When using Express Mail, the Express Mail label number is mandatory;  
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37 C.F.R. § 1.8(a)

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37 C.F.R. § 1.10\*

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\_\_\_ facsimile transmitted to the Patent and Trademark Office, (703) \_\_\_\_\_

  
Signature

Date: April 4, 2005

Laura K. Cahill

(type or print name of person certifying)

\* Only the date of filing (' 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under ' 1.8 continues to be taken into account in determining timeliness. See ' 1.703(f). Consider "Express Mail Post Office to Addressee" (' 1.10) or facsimile transmission (' 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

3. Payment of fee:

Authorization is hereby made to charge the amount of **\$1,712.00** to Credit card as shown on the attached credit card information authorization form PTO-2038.

Charge any additional fees required by this paper or credit any overpayment to Deposit Account No. 50-0537.


A duplicate of this paper is attached.

Date: April 4, 2005

Reg. No.: 31,115

Tel. No.: 440-684-1090

**Customer No.: 22203**

  
\_\_\_\_\_  
Signature of Practitioner  
Mark Kusner

Kusner & Jaffe  
Highland Place - Suite 310  
6151 Wilson Mills Road  
Highland Heights, OH 44143